Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	**Complete if Known**	
	Application Number	10/058,173
# FEE TRANSMITTAL	Filing Date	January 25, 2002
## For FY 2009	First Named Inventor	Steven M. Stefanik
	Examiner Name	Zhen, Li B.
☐ Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2194
TOTAL AMOUNT OF PAYMENT ($) 810	Attorney Docket No.	3779.ACCESS.ASA

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☑ Deposit Account   Deposit Account Number: 50-3102   Deposit Account Name: Berry & Associates P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☑ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, except for the filing fee

☑ Charge any additional fee(s) or underpayments of fee(s)   ☑ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card
information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee ($)	Small Entity Fee ($)	Fee ($)	Small Entity Fee ($)	Fee ($)	Small Entity Fee ($)	Fees Paid ($)
Utility	330	165	540	270	220	110	_____
Design	220	110	100	50	140	70	_____
Plant	220	110	330	165	170	85	_____
Reissue	330	165	540	270	650	325	_____
Provisional	220	110	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)	Multiple Dependent Claims	
_____ - 20 or HP =	_____ x	_____	= _____	Fee ($)	Fee Paid ($)
HP = highest number of total claims paid for, if greater than 20.					
Indep. Claims	Extra Claims	Fee ($)	Fee Paid ($)	_____	_____
_____ - 3 or HP =	_____ x	_____	= _____		
HP = highest number of independent claims paid for, if greater than 3.					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer
listings under 37 CFR 1.52(e)), the application size fee due is $270 ($135 for small entity) for each additional 50
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
_____ - 100 =	_____	/ 50 = _____ (round up to a whole number) x	_____	= _____

4. OTHER FEE(S)

Non-English Specification, $130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Continued Examination ($810)

Fees Paid ($)

810

SUBMITTED BY

Signature	/Shawn Diedtrich/	Registration No. (Attorney/Agent) 58,176	Telephone (310) 247-2860
Name (Print/Type)	Shawn Diedtrich		Date March 9, 2009